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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



OMB APPROVAL
OMB Number: 3235-0076
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SEC USE	ONLY
Prefix	Serial
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Name of Offering Check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock			
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment			
A. BASIC IDENTIFICATION DATA			
1. Enter the information requested about the issuer	05068588		
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)			
Automattic Inc.			
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Num 355 First Street, No. 202, San Francisco, CA 94105 (832) 875-4078	ber (Including Area Code)		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Num (if different from Executive Offices)	nber (Including Area Code)		
Brief Description of Business			
Software for the creation and operation of web logs or "blogs" and related services	PROCESSED		
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed other (please specify):	OCT 1 9 2005 € THOMSON		
Month Year Actual or Estimated Date of Incorporation or Organization: 0 3 0 5 ★ Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) □ E	FINANCIAL		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

-ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Matthew Mullenweg Business or Residence Address (Number and Street, City, State, Zip Code) Automattic Inc., 355 First Street, No. 202, San Francisco, CA 94105 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Stefan V. Clulow Business or Residence Address (Number and Street, City, State, Zip Code) Greenberg Traurig, LLP, 1900 University Avenue, 5th Floor, East Palo Alto, CA 94303 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Beneficial Owner

Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Executive Officer

Director

General and/or

Managing Partner

					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
1.	and the second s						Yes	No X					
2.	Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?							s N/A					
						•						Yes	No
3.			permit join									X	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
		Last name	first, if indi	ividual)				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	——————————————————————————————————————			
N/. Bus		Residence	Address (N	umber and	d Street, Ci	tv. State. 7	(in Code)	·					
						,, =, 2	p (code)						
Naı	me of As	sociated B	roker or De	aler									
Sta	tes in WI	nich Persor	n Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	••••••				******	•••••	☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	vidual)		31777							
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)	<u> </u>		***************************************		·	
Naı	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Al	l States
	AL IL MT	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)	· - -					
Nar	ne of As	sociated Bi	roker or De	aler		-							
Sta	tes in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check "All States" or check individual States)													
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and				
	already exchanged.	Aggregate	•	Ar	nount Already
	Type of Security	Offering Pr			Sold
	Debt	<u> </u>		\$	
	Equity	1,250,00	0.00	\$_	1,100,000.00
	Common Preferred				
	Convertible Securities (including warrants)	<u> </u>		\$	
	Partnership Interests	.		\$	
	Other (Specify)	5		\$	
	Total	1,250,00	0.00	\$	1,100,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		'n	Aggregate
		Investors			of Purchases
	Accredited Investors	3		\$_	1,100,000.00
	Non-accredited Investors			\$_	
	Total (for filings under Rule 504 only)			\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
		Type of		D	Oollar Amount
	Type of Offering	Security			Sold
	Rule 505				
	Regulation A				
	Rule 504		—	\$_	
	Total			\$_	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	*************		\$	
	Printing and Engraving Costs			\$	
	Legal Fees		X	\$_	30,000.00
	Accounting Fees			\$_	
	Engineering Fees	************		\$_	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$_	
	Total			\$	30,000.00

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C — proceeds to the issuer."			\$ 1,220,000.00
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] \$	\$
	Purchase of real estate] \$	\$
	Purchase, rental or leasing and installation of made and equipment	chinery] \$	\$
	Construction or leasing of plant buildings and fac-	cilities]\$. 🗆 \$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assissuer pursuant to a merger)		٦ د	П \$
			=	_
			-	
			-	
] \$	
	Column Totals] \$	x \$ 1,220,000.00	
	Total Payments Listed (column totals added)			220,000.00
		D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commiss	ion, upon writte	
Issi	er (Print or Type)	Signature /	ate	
Au	omattic Inc.		October 12, 2005	
Naı	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Ste	an V. Clulow	Secretary		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 proprovisions of such rule?		•	Yes No □				
	See	Appendix, Column 5, for state r	esponse.					
2.	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.							
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	uer has read this notification and knows the conte thorized person.	nts to be true and has duly caused	this notice to be signed on its behal	f by the undersigned				
Issuer (Print or Type)	Signature	Date					
Automattic Inc. October 12, 2005								
Name (Print or Type) Title (Print or Type)								

Secretary

Instruction:

Stefan V. Clulow

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.